

Please type a plus (+) sign in this box →


+

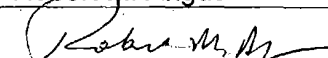
PTO/SB/05 (4/98)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new non-provisional applications under 37 C.F.R. § 1.53(B))</small>		Attorney Docket No. <b>S104.12-0041/STL 11309.00</b>																												
		First Inventor or Application Identifier <b>Ricardo SoonLian Lim et al.</b>																												
		Title	<b>MULTI-TIERED RETRY SCHEME FOR LOADING SYSTEM DATA</b>																											
		Express Mail Label No. <b>EV 178016465 US</b>																												
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>Address To:</b> <b>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</b>																												
1. <input checked="" type="checkbox"/> *Fee Transmittal Form e.g., PTO/SB17) <small>(Submit an original and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table of Computer program (Appendix)	<div style="writing-mode: vertical-rl; transform: rotate(180deg);">17410 U.S. PTO 10/603015 06/24/03</div> 																												
2. <input type="checkbox"/> Applicant Claims small entity status	8. Nucleotide and/or Amino Acid Sequence Submission <small>(If applicable, all necessary)</small>																													
3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Sheets <b>17</b>]</span> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the Invention)</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to Microfiche Appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	a. <input type="checkbox"/> Computer Readable Copy																													
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. § 113) <span style="float: right;">[Total Sheets <b>2</b>]</span>	b. Specification Sequence Listing on: <ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 Copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul>																													
5. Oath or Declaration <span style="float: right;">[Total Sheets <b>3</b>]</span> <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small><ul style="list-style-type: none"><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).</small></li></ul></li></ul>	c. <input type="checkbox"/> Statement verifying identity of above copies																													
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	<b>ACCOMPANYING APPLICATION PARTS</b>																													
18. If a <b>CONTINUING APPLICATION</b> , check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation –in part (CIP) of prior application No: _____ / Prior application information: Examiner _____ Group/Art Unit: _____ <b>FOR CONTINUATION or DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))																													
<b>17. CORRESPONDENCE</b>				10. <input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>																										
<input type="checkbox"/> Customer Number or Bar Code Label <span style="float: right;">or <input checked="" type="checkbox"/> Correspondence address below</span> <div style="border: 1px solid black; width: 200px; height: 20px; margin: 5px auto; text-align: center;"><small>(Insert Customer No. or Attach bar code label here)</small></div>				11. <input type="checkbox"/> English Translation Document (if applicable)																										
<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width: 30%;">Name</td><td colspan="3">Robert M. Angus</td></tr><tr><td></td><td colspan="3">WESTMAN CHAMPLIN &amp; KELLY</td></tr><tr><td>Address</td><td colspan="3">Suite 1600 – International Centre 900 South Second Avenue</td></tr><tr><td>City</td><td>Minneapolis</td><td>State</td><td>MN</td></tr><tr><td>Country</td><td>USA</td><td>Telephone</td><td>(612) 334-3222</td></tr><tr><td></td><td></td><td>Zip Code</td><td>55402-3319</td></tr><tr><td></td><td></td><td>Fax</td><td>(612) 334-3312</td></tr></table>				Name	Robert M. Angus				WESTMAN CHAMPLIN & KELLY			Address	Suite 1600 – International Centre 900 South Second Avenue			City	Minneapolis	State	MN	Country	USA	Telephone	(612) 334-3222			Zip Code	55402-3319			Fax
		Name	Robert M. Angus																											
			WESTMAN CHAMPLIN & KELLY																											
		Address	Suite 1600 – International Centre 900 South Second Avenue																											
City	Minneapolis	State	MN																											
Country	USA	Telephone	(612) 334-3222																											
		Zip Code	55402-3319																											
		Fax	(612) 334-3312																											
		13. <input type="checkbox"/> Preliminary Amendment																												
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>																												
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>																												
		16. <input type="checkbox"/> Nonpublication Request Under 35 USC 122 <small>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent</small>																												
		17. <input checked="" type="checkbox"/> Other: Notice of Change of Address																												

Name (Print/type)	Robert M. Angus	Registration No. (Attorney/Agent)	24,383
Signature		Date	6/24/03

<b>FEE TRANSMITTAL</b>		Complete if Known																																																																																																																																															
		Application No.																																																																																																																																															
		Filing Date																																																																																																																																															
		First Named Inventor																																																																																																																																															
		Title																																																																																																																																															
		Group Art Unit																																																																																																																																															
Examiner Name																																																																																																																																																	
Total Amount of Payment    \$ 750 and \$40		Atty. Docket Number    S104.12-0041/STL 11309.00																																																																																																																																															
<b>METHOD OF PAYMENT (Check One)</b>		<b>FEE CALCULATION (Continued)</b>																																																																																																																																															
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fee required under 37 C.F.R. § 1.16 and 1.17, including any petition fee, and credit any over payments to Deposit Account No. <u>23-1123</u> . Westman, Champlin & Kelly, P.A.  2. <input checked="" type="checkbox"/> Checks Enclosed		<b>3. ADDITIONAL FEES</b>  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>(\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - Late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - Late provisional Filing Fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For Filing a Request for Reexamination. (ex parte)</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1253</td> <td>930</td> <td>2253</td> <td>465</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>725</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>1,970</td> <td>2255</td> <td>985</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>280</td> <td>2403</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1814</td> <td>110</td> <td>2814</td> <td>55</td> <td>Terminal Disclaimer Fee</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to Revive - unavoidable</td> <td></td> </tr> <tr> <td>1453</td> <td>1,300</td> <td>2453</td> <td>650</td> <td>Petition to Revive - unintentional</td> <td></td> </tr> <tr> <td>1501</td> <td>1,300</td> <td>2501</td> <td>650</td> <td>Utility/Reissue issue fee (inc. advance copies)</td> <td></td> </tr> <tr> <td>1502</td> <td>470</td> <td>2502</td> <td>235</td> <td>Design issue fee (inc. advance copies)</td> <td></td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> <td>Petitions related to provisional applications</td> <td></td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> <td>Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td colspan="4">Other Fee (specify) _____</td> <td></td> <td></td> </tr> </tbody> </table>		Large Entity		Small Entity		Fee Description	Fee Paid	Fee	Fee	Fee	Fee	Code	(\$)	Code	(\$)			1051	130	2051	65	Surcharge - Late filing fee or oath		1052	50	2052	25	Surcharge - Late provisional Filing Fee or cover sheet		1053	130	1053	130	Non-English specification		1812	2,520	1812	2,520	For Filing a Request for Reexamination. (ex parte)		1251	110	2251	55	Extension for reply within first month		1252	410	2252	205	Extension for reply within second month		1253	930	2253	465	Extension for reply within third month		1254	1,450	2254	725	Extension for reply within fourth month		1255	1,970	2255	985	Extension for reply within fifth month		1402	320	2402	160	Filing a brief in support of an appeal		1403	280	2403	140	Request for oral hearing		1814	110	2814	55	Terminal Disclaimer Fee		1452	110	2452	55	Petition to Revive - unavoidable		1453	1,300	2453	650	Petition to Revive - unintentional		1501	1,300	2501	650	Utility/Reissue issue fee (inc. advance copies)		1502	470	2502	235	Design issue fee (inc. advance copies)		1460	130	1460	130	Petitions to the Commissioner		1807	50	1807	50	Petitions related to provisional applications		1806	180	1806	180	Submission of Information Disclosure Statement		8021	40	8021	40	Recording each patent assignment per property (times number of properties)		Other Fee (specify) _____					
Large Entity		Small Entity		Fee Description	Fee Paid																																																																																																																																												
Fee	Fee	Fee	Fee																																																																																																																																														
Code	(\$)	Code	(\$)																																																																																																																																														
1051	130	2051	65	Surcharge - Late filing fee or oath																																																																																																																																													
1052	50	2052	25	Surcharge - Late provisional Filing Fee or cover sheet																																																																																																																																													
1053	130	1053	130	Non-English specification																																																																																																																																													
1812	2,520	1812	2,520	For Filing a Request for Reexamination. (ex parte)																																																																																																																																													
1251	110	2251	55	Extension for reply within first month																																																																																																																																													
1252	410	2252	205	Extension for reply within second month																																																																																																																																													
1253	930	2253	465	Extension for reply within third month																																																																																																																																													
1254	1,450	2254	725	Extension for reply within fourth month																																																																																																																																													
1255	1,970	2255	985	Extension for reply within fifth month																																																																																																																																													
1402	320	2402	160	Filing a brief in support of an appeal																																																																																																																																													
1403	280	2403	140	Request for oral hearing																																																																																																																																													
1814	110	2814	55	Terminal Disclaimer Fee																																																																																																																																													
1452	110	2452	55	Petition to Revive - unavoidable																																																																																																																																													
1453	1,300	2453	650	Petition to Revive - unintentional																																																																																																																																													
1501	1,300	2501	650	Utility/Reissue issue fee (inc. advance copies)																																																																																																																																													
1502	470	2502	235	Design issue fee (inc. advance copies)																																																																																																																																													
1460	130	1460	130	Petitions to the Commissioner																																																																																																																																													
1807	50	1807	50	Petitions related to provisional applications																																																																																																																																													
1806	180	1806	180	Submission of Information Disclosure Statement																																																																																																																																													
8021	40	8021	40	Recording each patent assignment per property (times number of properties)																																																																																																																																													
Other Fee (specify) _____																																																																																																																																																	
<b>FEE CALCULATION</b>																																																																																																																																																	
<b>1. BASIC FILING FEE</b>																																																																																																																																																	
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>(\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>750</td> <td>2001</td> <td>375</td> <td><input checked="" type="checkbox"/> Utility Filing Fee</td> </tr> <tr> <td>1002</td> <td>330</td> <td>2002</td> <td>165</td> <td><input type="checkbox"/> Design Filing Fee</td> </tr> <tr> <td>1004</td> <td>750</td> <td>2004</td> <td>375</td> <td><input type="checkbox"/> Reissue Filing Fee</td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td><input type="checkbox"/> Prov. Filing Fee</td> </tr> <tr> <td colspan="5" style="text-align: right;"><b>Subtotal (1) \$ 750</b></td> </tr> </tbody> </table>		Large Entity		Small Entity		Fee Description	Fee	Fee	Fee	Fee	Code	(\$)	Code	(\$)		1001	750	2001	375	<input checked="" type="checkbox"/> Utility Filing Fee	1002	330	2002	165	<input type="checkbox"/> Design Filing Fee	1004	750	2004	375	<input type="checkbox"/> Reissue Filing Fee	1005	160	2005	80	<input type="checkbox"/> Prov. Filing Fee	<b>Subtotal (1) \$ 750</b>																																																																																																													
Large Entity		Small Entity		Fee Description																																																																																																																																													
Fee	Fee	Fee	Fee																																																																																																																																														
Code	(\$)	Code	(\$)																																																																																																																																														
1001	750	2001	375	<input checked="" type="checkbox"/> Utility Filing Fee																																																																																																																																													
1002	330	2002	165	<input type="checkbox"/> Design Filing Fee																																																																																																																																													
1004	750	2004	375	<input type="checkbox"/> Reissue Filing Fee																																																																																																																																													
1005	160	2005	80	<input type="checkbox"/> Prov. Filing Fee																																																																																																																																													
<b>Subtotal (1) \$ 750</b>																																																																																																																																																	
<b>2. EXTRA CLAIM FEES</b>																																																																																																																																																	
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Number Claims</th> <th>Prior**</th> <th>Extra</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total</td> <td>20</td> <td>20</td> <td>0</td> <td>18</td> <td>0</td> </tr> <tr> <td>Indep.</td> <td>3</td> <td>3</td> <td>0</td> <td>84</td> <td>0</td> </tr> </tbody> </table>			Number Claims	Prior**	Extra	Fee from Below	Fee Paid	Total	20	20	0	18	0	Indep.	3	3	0	84	0																																																																																																																														
	Number Claims	Prior**	Extra	Fee from Below	Fee Paid																																																																																																																																												
Total	20	20	0	18	0																																																																																																																																												
Indep.	3	3	0	84	0																																																																																																																																												
Multiple Dependent Claims  ** Insert 3 and 20, or number previously paid if greater; Reissue see below  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Description</th> </tr> <tr> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> </tr> <tr> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>(\$)</th> <th></th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> </tr> <tr> <td>1201</td> <td>84</td> <td>2201</td> <td>42</td> <td>Independent claims in excess of 3</td> </tr> <tr> <td>1203</td> <td>280</td> <td>2203</td> <td>140</td> <td>Multiple Dependent Claims</td> </tr> <tr> <td>1204</td> <td>84</td> <td>2204</td> <td>42</td> <td>Reissue Independent Claims over Original Patent</td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>Reissue claims in excess of 20 and over original patent</td> </tr> </tbody> </table>		Large Entity		Small Entity		Description	Fee	Fee	Fee	Fee	Code	(\$)	Code	(\$)		1202	18	2202	9	Claims in excess of 20	1201	84	2201	42	Independent claims in excess of 3	1203	280	2203	140	Multiple Dependent Claims	1204	84	2204	42	Reissue Independent Claims over Original Patent	1205	18	2205	9	Reissue claims in excess of 20 and over original patent																																																																																																									
Large Entity		Small Entity		Description																																																																																																																																													
Fee	Fee	Fee	Fee																																																																																																																																														
Code	(\$)	Code	(\$)																																																																																																																																														
1202	18	2202	9	Claims in excess of 20																																																																																																																																													
1201	84	2201	42	Independent claims in excess of 3																																																																																																																																													
1203	280	2203	140	Multiple Dependent Claims																																																																																																																																													
1204	84	2204	42	Reissue Independent Claims over Original Patent																																																																																																																																													
1205	18	2205	9	Reissue claims in excess of 20 and over original patent																																																																																																																																													
<b>Subtotal (2) \$ 0</b>		<b>Subtotal (3) \$ 40.00</b>																																																																																																																																															

Signature Robert M. Angus  
 (Robert M. Angus)

Reg. No. 24,383

Date Jan 24, 2003

Deposit Account No. 23-1123

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named  
Inventor : Ricardo SoonLian Lim et al.

Appln. No.: Filed Herewith

Filed : Filed Herewith

For : MULTI-TIERED RETRY SCHEME FOR  
LOADING SYSTEM DATA

Docket No.: S104.12-0041/STL 11309.00

Group Art Unit:

Examiner:

NOTICE OF CHANGE OF ADDRESS

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I HEREBY CERTIFY THAT THIS PAPER IS BEING  
SENT BY U.S. MAIL, FIRST CLASS, TO THE  
COMMISSIONER FOR PATENTS, P.O. BOX 1450,  
ALEXANDRIA, VA 22313-1450, THIS

\_\_\_\_ DAY OF \_\_\_\_\_, 2003.

\_\_\_\_\_  
PATENT ATTORNEY

Sir:

Please change the correspondence address of record for  
all purposes including notices of maintenance fees to:

Kirk A. Cesari  
SEAGATE TECHNOLOGY LLC  
Intellectual Property Dept. - SHK2LG  
1280 Disc Drive  
Shakopee, MN 55379-1863

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

By: 

Robert M. Angus, Reg. No. 24,383  
WESTMAN CHAMPLIN & KELLY  
Suite 1600 - International Centre  
900 Second Avenue South  
Minneapolis, MN 55402-3319

RMA/djb